

Application Data Sheet

Application Information

Application number::

Filing Date::

Herewith

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

SPRAY DRY COACERVATION SYSTEMS
AND METHODS

Attorney Docket Number::

020714-001910US

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

5

Small Entity?::

Yes

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eric
Middle Name:: Y.
Family Name:: Sheu
Name Suffix::
City of Residence:: Lafayette
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 7 Olde Creek Place
City of Mailing Address:: Lafayette
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94549

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Yadong
Middle Name::
Family Name:: Liu
Name Suffix::
City of Residence:: Fremont
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 43555 Grimmer Blvd., Apt. C323
City of Mailing Address:: Fremont
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94549

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Edmund
Middle Name:: J.
Family Name:: Niedzinski
Name Suffix::
City of Residence:: Vacaville
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 483 Aberdeen Way
City of Mailing Address:: Vacaville
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 95687

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/460,267	04/04/03

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name:: Genteric, Inc.
Street of mailing address:: 1650 Harbor Bay Parkway
City of mailing address:: Alameda
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94502